



NAVAL MEDICAL CLINIC ANNAPOLIS

# CLINIC CRIER

Homepage - <http://nmclanna.med.navy.mil>  
WINNER OF THE 1999 MHS CUSTOMER SATISFACTION AWARD



250 Wood Road,  
Annapolis, MD 21402-5050

## From the Commanding Officer: CAPT Kathleen D. Morrison, MSC, USN

Dear NMCLA Family,

The Strategic Planning Process and Annual Planning Goal Groups are really paying off because of your participation! Thanks to the Goal Leaders for their continued progress. As you recall, Strategic Planning is the vision for the command at the 30,000 feet level. We know we can't focus on everything at once, so the Annual Planning groups give us the opportunity to work on 8 key items and do them right!

We are focusing on annual planning so that our day-to-day clinical and administrative operations remain our priorities. The Administrative operations include completing the USNA academic year, enhancing JCAHO preparation and meeting our medical readiness requirements. We, as Military personnel, wear this uniform to support and defend the Constitution and the United States of America. Thank you for your immediate attention and cooperation ensuring that these medical and military requirements are met. We are working with the POMI and Directors to streamline the process and lessen the time impact on you.

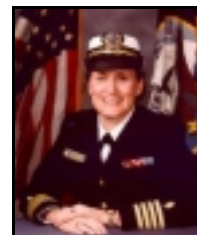
JCAHO preparation has started. Although we are not slated until March 2002 for the combined JCAHO/IG inspection, it is important that we strive to be inspection-ready with the physical plant, our performance improvement (outcome based), updated policy and procedure manuals. If

we say we check the refrigerator temps 3 times a day, they will want to see the logbook that says that. The zone inspections highlight patient and life safety hazards, but getting ready for them is a great way to do some Spring Cleaning. The JCAHO Standards Teams are assessing our compliance with the processes. We appreciate your work on the Professional Development files.

As Spring begins its arrival, please take the time to enjoy the USNA and Yard activities. Lunch at King Hall, Forrestal lectures, attendance at the symposiums, USNA musicals and Band concerts are just a few of the activities. Enjoy the benefits of being assigned to the Annapolis area. The history and the traditions are phenomenal!

Thanks to each of you for the extra things you do every day to make this command special-your sponsor's outreach to new staff members saying "We're glad you are here", staff covering for a shipmate, your self-help projects, and going the extra mile for the patient ensuring quality care. It is awesome to see the HEALTH CARE TEAM in action! Each of us has something to contribute to make this a better place...we need each other.

Blessings,  
CO



## Shipmate in the Spotlight

Jesse Harrahill came to the Primary Care Clinic as the JSA Project Manager in November 2000 armed with 20 plus years of service as a healthcare executive with Navy Medicine. He brought with him a wealth of knowledge and experience gained from 28 years of service as a prior enlisted and a commissioned Medical Service Corps Officer. As a retiree/family member beneficiary of medical care at this clinic directly involved in the challenging role of providing medical services to all beneficiaries, Mr. Harrahill has a unique perspective of the two sides of military healthcare delivery in the managed care setting. Jesse Harrahill resides in Arnold with his wife, CDR Mary (Bess) Harrahill, who currently serves as the OIC of USS COMFORT (TAH-20). They have 2 children, Kole (20), a sophomore at the Massachusetts Maritime Academy, and Erin (11), who is in 5<sup>th</sup> grade. For all of you running enthusiasts' information, Jesse is presently preparing for the Boston Marathon in April, his 6<sup>th</sup> marathon participation to date. He runs about 5-6 miles daily and on the weekends, "sky's the limit." He goes as far as his feet will take him.



Jesse Harrahill came to the Primary Care Clinic as the JSA Project Man-

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MARCH 2001

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### SPECIAL POINTS OF INTEREST:

**Prime Enrollment - 11230**

**PCC - 3307**

**Pediatrics - 1012**

**Mil Med - 6911**

**MONTH WOMEN'S HISTORY**

**Coming Soon!**

**MARCH 2001**

- 20 E-4 Advancement Exam
- 22 Women's History Celebration
- 23 Chile Cook Off (NRS)
- 29 Car Wash (NRS)
- 30 Awards Ceremony

**APRIL 2001**

- 5 Cookie Bake-Off (NRS)
- 6 Easter Basket Raffle (NRS)
- 12 Force MC Visit  
Silent Auction (NRS)  
LT Tyler's Retirement
- 13 Jelly Bean Contest (NRS)

# Are We JCAHO Ready?

## Ms. Eva Miller, PI Officer

Well, here we are at #8 and the chapter on **ENVIRONMENT OF CARE**. This is probably the most challenging of all the chapters in the manual. These standards cover all the aspects of the environment in which we provide care and services and are written in much more detail than the other standards. LT Martinelli, Head, Preventive Medicine, Infection Control Officer and Safety Officer, is the team leader for this chapter. There are 7 pillars to these standards and each "pillar" has a point of contact:

- **Safety** (POC is HMC Thomas)
- **Security** (POC is MA1 Green)
- **Hazardous Materials** (POC is Stu Weiss)
- **Emergency Preparedness** (POC is LCDR Weisz)
- **Life Safety** (POC is Michelle Smith)
- **Medical Equipment** (POC is HMC Payne)
- **Utility Systems** (POC is Michelle Smith)

All of these members form the Environment of Care Committee and bring a highly specialized knowledge of their areas to that committee. Each of these areas must establish a management plan that addresses how that entity will be managed, measured, and maintained. The plans for each area must be fully implemented and evaluated annually to make sure we have carried out the plan and have provided a safe environment for staff, patients, and visitors.

In a previous article on Leadership, we learned that the leaders of the organization have to plan for space, equipment, and resources. This has to be done taking the 7 pillars of the environment into considera-

tion.

Each of the individuals responsible for a pillar has the responsibility to educate the staff on their particular area of expertise. The staff has to know the physical characteristics of the environment in which they provide care. The staff has to know how to monitor that environment, when and how to report problems, and to whom they report.

Each area of the environment must have measures in place to monitor the performance of the area and identify ways to improve. Testing of systems is necessary, drills are required to maintain a high level of performance, and equipment is inspected to ensure dependability.

This set of standards requires us to make the building and grounds suitable to provide services and serve the patients. It also requires that we provide safe delivery of radiology services and adhere to a nonsmoking policy for everyone, staff, patients and visitors.

You can test your readiness with these questions:

### 1. Safety

- How is safety training provided to you in your department?
- Is that training documented in your Professional Development File?
- How and to whom do you report potential Safety issues?

### 2. Security

- How and to whom would you report potential security issues?
- How is your area secured after duty hours?
- What are potential security risks?
- Have you received security training? Is that training documented in your Professional Development file?

### 3. Hazardous Material

- What do you do if you spill something and you do not know if it is hazardous?
- What do you do if there is a hazardous substance spill?
- Where are the MSDS sheets for your area? Have you reviewed those sheets for your department?

- What are the procedures for handling infectious waste?

### 4. Medical Equipment

- What would you do if a piece of equipment failed? Who would you notify?
- What would you do if a patient was injured?
- What do you do with the equipment when an injury occurs?
- Were you trained to use the equipment in your department? Is that training documented in your Professional Development File?
- Who is responsible for maintenance of medical equipment?
- How do you know that medical equipment is appropriately checked?

### 5. Life Safety

- What do you do in case of fire?
- Where is the closest fire extinguisher? Pull alarm? Building exit?
- How do you prioritize patient evacuation?
- What steps do you take to make sure all patients have been evacuated?
- Have you had department training about what to do in case of a fire? Is that documented in your Professional Training file?

### 6. Utility Systems

- How and to whom do you report utility failures? (water, electric)
- How are you educated regarding steps to take should there be a problem with a utility system?

### 7. Emergency Preparedness

- What would you do if the power to your refrigerator went off over the weekend? How would you know? What procedures should you follow to determine status of contents?
- Where are the authorized smoking areas for staff and patients?
- How is patient privacy protected when they are in your department?
- How is patient privacy protected when patients are checking in?



SK1 Rayford Shackleford received a Letter of Commendation, Command Photo, and the traditional shadow box from CAPT McClain, Acting CO, and LT Seymour, Department Head at a presentation ceremony. SK1 Shackleford will transfer to the fleet reserve effective 30 April 2001 after 20 years of honorable service.



A going away luncheon in honor of CDR Wickes, who transferred to Okinawa, was held on 22 Feb.

**Military Medicine** - *"..... after an erroneous appointment scheduled through TRICARE, I was sent to Military Medicine where they were very helpful and accommodating. I am thankful for the quick, adequate service. I drove from Wallops Island for the this appointment. Keep up the good work!"*  
LTJG Mary McAvoy, USN

**Optometry Department** - *"Very professional department. Timely appointments. A well-kept secret that I will pass on to colleagues."*  
LCDR James T. Castle, USN

**Pharmacy Staff** - *"Your people are courteous, helpful, understanding, very professional!! I have been using this Pharmacy for over a year—I just cannot say enough about the gracious staff here. Please keep up the outstanding work! Don't change anything."*  
CAPT William Marin, USN (Ret)

**Pediatrics (HM2 Klimczak)** - *" Very wonderful. At the end of the day, he very graciously did a throat culture on my daughter. This department is the best! They are consistently kind and courteous. Thank You."*  
Michelle Mazanec

**Physical Therapy Staff** - *" I am an Air Force officer who was recently treated for chronic hip pain at your clinic located in Bancroft Hall and I wanted to pass on my experience with your staff while under their care. From day one, LCDR Brown and her people showed a personable professionalism I have not seen at any other military medical facility. .... I am now able to resume a physical conditioning program and continue my improvement. I would like to take this opportunity to recognize them by name: HM1 Moesch, HM2 Rogers, HM2 Doersom, HM3 Hauswirth, HM3 Tiscareno and HM3 Vega."*  
CAPT Gregory E. Nowak, USAF

## PAIN MANAGEMENT PROGRAM CDR B. BAKER, NC, USN

"Are you having any pain?" will be one of the questions asked when patients arrive for health care at Naval Medical Clinic Annapolis. A comprehensive Pain Management program has been developed and pain will be assessed when patients arrive in their assigned clinics for care. The Primary Care Managers (PCM) will be using this information to assist the patient in assessing pain, identifying possible causes of the pain, and a treatment plan to reduce, control, or eliminate the pain the patient is describing. There will be two different types of scales that will be used to provide a description of the pain. A Visual Analog Scale (VAS) scale with the numbers 0-10 will be used for adults and children old enough to understand. The range will be 0 (no pain) and continuing with the numbers all the way up to 10 (worst pain the patient ever experienced). For the pediatric population, a series of faces will be used so that the child can point to the face that best describes what they are feeling at that moment.

There is a national emphasis on improving the management of pain for all patients. The Joint Commission on Accreditation of Healthcare Organizations has included **pain assessment** as one of the criteria they will be assessing during an accreditation survey. Naval Medical Clinic Annapolis is very concerned about providing outstanding pain management of patients. The next time you have a medical appointment, be sure to tell the staff if you have any questions concerning your pain or management of your pain.

## TRANSFER PROCESSING INFORMATION HMCS(SW/FMF) C. GARRETT, USN

Transfer Information Packages (TIP) contain important forms that impact travel itineraries and pay entitlements for both single Sailors, and Sailors travelling with family members. Planning for household good shipments, advance pay dislocation allowance, detachment date, PCS leave, even transportation of pets can be coordinated by filling out these forms accurately. It is very important to complete and return your TIP 30 days after receipt, especially if transferring overseas (Passports, Visas, Overseas/sea service screen may be required); delays or last minute submissions may affect leave time. Your PLR is here to answer questions and/or make appointments, when necessary, with PSD, Fort Meade. If you would like information on your next duty station surf the Military SITES Web page. SITES web page has useful information on almost every duty station, for every branch of service: [www.dmdc.osd.mil/sites/owa/ShowPage?p=INDEX&p\\_SID=BUMLFNSFXWQ](http://www.dmdc.osd.mil/sites/owa/ShowPage?p=INDEX&p_SID=BUMLFNSFXWQ)  
Separation/Retirement/Transfer to Fleet Reserve: Personnel separating, transferring to the Fleet Reserve, or retiring from the Navy, must call PSD Fort Meade to set up an appointment with the Separations/Retirement Section. The FIRST appointment must be 2 MONTHS prior to your last day at the **Command--NOT YOUR LAST DAY IN THE NAVY!** In other words, this date must precede leave, house hunting, and job hunting (where applicable) if it is taken consecutively and with the intent of not returning to the Annapolis area. Your Physical Exam must be completed prior to this FIRST appointment. I cannot overemphasize the importance of these timetables! TAMP and the Separation Checklist, DD Form 2648, must also be completed prior to this initial appointment. There may be a total of 3 appointments for processing your paperwork; the 3rd will be contingent on whether a member desires to pick-up their DD 214 or have it mailed. Again, delays or last minute appointments WILL affect leave and no-cost TAD time--DO NOT DELAY. Planning a retirement ceremony, want transition information? Go to [www.staynavy.navy.mil](http://www.staynavy.navy.mil) for the latest.





CDR L. Wickes - NMCCM



LCDR Aldridge received her Navy & Marine Corps Commendation Medal from the Commanding Officer.



ENS D. Zahumensky - Pt. Admin.



The Commanding Officer presented a plaque and mementos to HMCS Andre Jones, guest speaker at the NMCLA African-American Heritage Celebration.



HM1 L. Herbert - NMC Portsmouth, VA  
 HM1 R. Penny - VP 5, Jacksonville, FL  
 HM2 W. Jordan - Sub IDC School Groton, CT  
 HM3 E. Arce - Lab School San Diego, CA  
 HM3 D. Johnson - OR School Portsmouth, VA  
 LT Tyler - Retirement  
 Mr. Maurice Sumner - USNA Safety Office

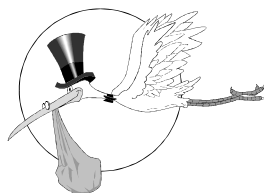


Marissa, Biancha, Sophia, and Nicholas Martinelli perform a liturgical dance, Order my Steps, during the African-American Celebration.

**CORRECTION:** Winning recipes  
 First place: Apple Cinnamon Ice Cream Pie—HN C. VanValkenburgh  
 Second place: Sour Cream Apple Squares—LT C. Martinelli



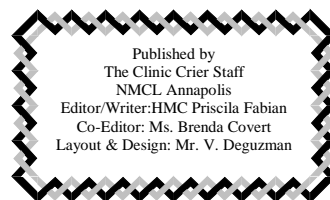
HN Talitha Kilburn and  
 HM3 Scott Foltz  
 19 February 2001



Baby Sofia Alicia born to Tracy and  
 Marco Tiscareno - 15 FEB 01

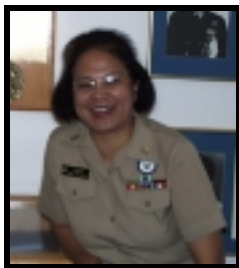
Patrick Alan born to Julie and Alan  
 Justiniano - 8 MAR 01

Baby Daniella Grace born to Dorothy  
 and Dale Ramirez - 14 MAR 01



## NMCL ANNAPOLIS CAREER COUNSELOR'S CORNER

HMC Priscila D. Fabian, USN



**Senior Minority Assistance to Recruiting Program (SEMINAR)** program was established to provide assistance to the Navy in its effort to recruit more Black, Hispanic, and Asian/Pacific Islander applicants and to enhance the Navy's image

in these communities. SEMINAR temporarily returns highly qualified Black, Hispanic, and Asian/Pacific Islander officers and senior enlisted personnel to their home communities for a 20-calendar day period to meet with local influential community members and to discuss the vast educational, career, and advancement opportunities the Navy offers. SEMINAR participants must be volunteers in paygrades E-6 to O-6. Although the program is specifically targeted to Black, Hispanic, and Asian/Pacific Islander communities, participation is open to other minorities. SEMINAR is performed in conjunction with permanent change of station orders. For more information on eligibility requirements and processing procedures, refer to BUPERSINST 1150.1 or contact the Command Career Counselor at 410 293-1750.

**MY FAVORITE WEBSITE:** <http://www.staynavy.navy.mil>.

